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COUNTY COUNCIL OF DURHAM.

EDUCATION COMMITTEE.

Ninth Annual Report

of the

School Medical Officer,

T. EUSTACE HILL, M.A., M.B., B.Sc., F.I.C.,

For the Year 1916.



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COUNTY COUNCIL OF DURHAM.

Education (Medical) Department.

NINTH

Annual Report of the School Medical Officer.

LADIES AND GENTLEMEN,

I.—MEDICAL INSPECTION STAFF.

During the past year the staff of the School Medical Department was still further reduced, owing to the resignation of Dr. Boleyn, towards the end of 1915, and the work was carried on by the School Medical Officer, assisted by three lady medical inspectors, one of whom (Dr. Niel) assisted the School Medical Officer in discharging the duties of the chief assistant, who is on active service. With such a small staff it was quite impossible to undertake the routine inspection of children at certain age periods, and the work during the greater part of the year was again limited to the examination of ailing and defective children, and the re-inspection of children found to be defective at previous examinations. During the last quarter of the year, however, time was found to examine "Entrants" at a number of the schools, and particulars of these inspections will be found in this report.

II.—NUMBER OF SCHOOLS, DEPARTMENTS, ETC., IN THE COUNTY.

There are now 400 elementary schools: 248 being provided and 152 non-provided schools, making a total of 709 departments. The accommodation provided in these schools is for 169,860, although the actual number of scholars on the roll was 143,732, the average attendance during the year being 128,285. Two new permanent and two temporary schools were opened during the year.

In some districts, owing to the schools being required for military purposes, there was some interference with educational work, and on account of military occupation seven schools were not visited by the school medical inspectors. Nearly all the schools occupied by the military authorities were situated in the Seaham Harbour area.

III.—INSPECTIONS AND FOLLOWING UP.

During the year 391 schools, comprising 692 departments, were visited by the school medical inspectors.

“Entrants” were examined in 35 schools, and re-inspections were carried out in 577 departments of 385 schools. The “Entrants” and “Specials” primarily examined numbered 2,529 and 5,522 respectively, and the number of children re-inspected was 11,251.

In accordance with the suggestion made by the Board of Education, an attempt was made by the health visitors to select the ailing and defective children for examination by the school medical inspectors, but it was found that this involved too great a demand on the time of the health visitors, and it was necessary to continue the old arrangement by which the selection of school children to be inspected was left to the head teachers. I quite agree with the Board of Education that the selection of such children should be in the hands of the health visitors rather than the teachers, but our staff of health visitors has other important duties to perform, such as the supervision of cases of tuberculosis, and the administration of the Notification of Births Act. The staff of health visitors, though it was increased towards the end of the year from 26 to 32, is still insufficient for the purpose, and seeing that only about one-fifth of their available time is at present devoted to the performance of school nurse’s work, it is obvious that it was impossible for them to visit over 700 departments for the selection of the children to be examined.

It is satisfactory to note that an increasing number of parents were present at the routine and special examination of their children: the attendance increasing from 15·4 per cent. to 19 per cent. of the cases examined.

There were no changes during the year in the arrangements for “following up” the children who underwent medical inspection, and the particulars of the work of the health visitors is set forth in Table VII. at the end of the report. From the report of the Superintendent Health Visitor on page 19 it will be seen that 2,770 visits were paid to schools, as compared with 1,932 in the previous year; while the number of home visits to school children increased from 13,569 to 21,432.

Inspections of the heads of children were made in three departments of three schools, and partial inspections were made in many others, but our staff was insufficient to permit of this important work being systematically performed.

Included in this report are Tables I. (a) and (b), Table IV., and a modification of Table II., which the Board of Education request should be embodied in the reports of school medical officers.

IV.—SPECIAL INSPECTIONS, ETC.

The number of special visits paid to schools by the school medical inspectors during 1916 was 42. These visits were generally confined to investigations into outbreaks of communicable diseases, although visits were also paid for such purposes as the examination of mentally and physically defective children. One of the enquiries made by Dr. Niel had reference to the prevalence of mild epidemic jaundice amongst school children at Rookhope, and in some other parts of the Weardale Rural District. The affection appeared to have been somewhat widely prevalent, but fortunately none of the cases were of a very serious character. Dr. Niel reported that it was improbable that there was any connexion between the outbreak and Weil's disease, and in her opinion it was a simple epidemic of catarrhal jaundice.

V.—SUPERVISION OF INFECTIOUS DISEASES.

It is satisfactory to report that during the past year the County education area was remarkably free from infectious disease, this being especially the case in respect to measles, as is evidenced by the fact that while in 1915 there were 1,009 deaths from measles in the administrative county, during the year under review this number fell to 55. In consequence the number of schools closed on that account was comparatively small. Ninety-two departments were closed on account of the prevalence of infectious disease during 1915, and during 1916 only twelve were so closed. Three schools were closed owing to the prevalence of whooping cough; three for mumps; two for diphtheria; two for measles; one for scarlet fever; and one for whooping cough and mumps. The procedure adopted for closing schools was the same as in previous years, and no school was closed by order of the local sanitary authorities under Article 57 of the Code.

VI.—FACTS DISCLOSED BY THE MEDICAL INSPECTION OF THE CHILDREN.

The results of the inspection are tabulated in the tables at the end of the report, but no table is given for the heights and weights of the children examined, as obviously no such table could serve any useful purpose, seeing that the inspections were for the most part limited to ailing or defective children.

For this reason also it is not possible to compare the figures for 1916 with those for previous years when for the most part the inspections related to children of certain age groups, the majority of whom were free from

defects ; but Table VII., giving the number of cases under the home supervision of the health visitors, supplies some interesting information as to the prevalence of certain affections.

As regards verminous conditions, the number of cases supervised shows a reduction on previous years, and there is definite evidence that these objectionable conditions are much less prevalent than was formerly the case. Acting on my recommendation, the Education Committee decided to take proceedings under Section 12 of the Children Act (1908), against the parents of children who, in spite of warning, remained grossly verminous, and it is very satisfactory that convictions were obtained in every case—36 in number—brought before the magistrates, in some instances the parents being sent to prison. I have no doubt whatever that this action has been beneficial in bringing to a sense of duty many parents who seriously neglected their children in this respect, and I take this opportunity of expressing my appreciation of the valuable assistance given by the teachers in our elementary schools towards removing these objectionable conditions affecting such a large proportion of the children.

An affection which has been exceptionally prevalent during the year in many of our elementary schools is scabies, and it will be noted that 1,901 cases received the attention of the school nurses. The prevalence of this disease has resulted in a considerable loss of attendance of children, and in numerous instances it has had the effect of keeping children from school for many weeks, and even months at a time. The difficulty in stamping out this affection is very great, as it frequently happens that not only school children, but other members of their family are affected, and the children consequently get re-infected. All the same, if school clinics were available, much loss of attendance from this objectionable condition would be avoided.

There was a considerable increase in the number of tuberculous children under the supervision of the school nurses, 1,088 cases being reported. This figure includes a large number of cases which were under supervision in previous years, and were not inspected by the school medical officers, and this accounts for the number being so much in excess of those given in Tables II. and IV.

VII.—RE-INSPECTIONS.

From Table IV. it will be noted that there were 11,251 children re-inspected in respect of 17,259 defects, as compared with 12,077 children and 16,129 defects in 1915. The percentage of defects which received treatment was 38·47, but it will be noted that in respect of 2,657 defects no information is available.

VIII.—CHILDREN EXCLUDED FROM SCHOOL.

The number of children temporarily excluded from school by the School Medical Officer under Article 53(b) of the Code was 2,925. A large number of these were on account of tuberculous or pre-tuberculous conditions. There was a very marked reduction in the number of exclusions on account of infectious disease. For instance, in 1915, 1,399 children were temporarily excluded on account of scarlet fever; 207 on account of diphtheria; and the number of exclusions of contacts of infectious diseases was 991. The respective figures for 1916 were 177, 124 and 291. This diminution is partly due to a reduction in the prevalence of these diseases, but more especially, I fear, to the fact that medical officers of health have, owing to the stress and disorganisation resulting from war conditions, omitted to notify the cases which they excluded, and whose exclusions should have been confirmed by the School Medical Officer.

The number of children permanently excluded increased from 39 to 89.

At the end of the report will be found a table giving particulars of the causes necessitating temporary and permanent exclusion of children.

IX.—ARRANGEMENTS FOR MEDICAL TREATMENT.

As far as possible the special examination of children reported by the assistant school medical officers to be suffering from defective eyesight and requiring treatment, was carried on during 1916. Dr. Lillie Johnson, who has had very considerable experience in ophthalmic work, visited certain schools, where special facilities had been provided for the treatment of eye defects, on two days per week, while the arrangement with Dr. Maling, Senior Honorary Surgeon to the Sunderland Eye Infirmary, referred to in my last annual report, was also continued. At the end of the report will be found a short report by Dr. Johnson, and also a tabulated statement of the cases treated. In necessitous cases free spectacles are provided out of a special fund, while a uniform charge of 3/6 is otherwise made in respect of each child supplied with spectacles through the Education Committee.

No school clinics have yet been instituted in the County Education Area, although the matter was considered by the Education Committee during the year, but it was realised that insuperable difficulties existed, and will continue to exist during the continuance of the war. At the request of the Committee I presented a further special report on the matter, and my recommendations were very favourably received. Eventually the Clerk to the Education Committee and myself were requested to prepare a scheme of school clinics for the County Education Area, with an estimate of cost and other particulars, and in the meantime I was authorised to enquire of the Committees of voluntary hospitals in the county and its neighbourhood as to whether they would be prepared to provide treatment

for such affections as enlarged tonsils, adenoids, eye and ear affections, etc., for children in the County Education Area urgently in need of attention. The replies I have so far received from the hospital authorities indicate that at many of the institutions it is impossible under present conditions to provide such treatment, and in any case, I must again emphasise my opinion that our school medical work will not be effective until school clinics are established throughout the county. The County Council has recently authorised the County Health Committee to prepare a scheme of maternity and child welfare for the County Area, and I am satisfied that the best arrangement would be to utilise the same clinic for maternity and child welfare work as well as for children of school age.

During 1916 the provision for the sanatorium and hospital treatment of tuberculosis among children of school age was very considerably extended, and nearly 100 beds are now available in various sanatoria for the treatment of children affected with pulmonary tuberculosis. Arrangements were continued with the Committees of a number of voluntary hospitals for the surgical treatment of cases of non-pulmonary tuberculosis. In addition, arrangements were completed by which the children sent from the County Area to the Stannington Sanatorium, Northumberland, and the County Sanatorium at Holywood Hall, are educated.

X.—MENTALLY DEFECTIVE CHILDREN.

No further progress has been made towards providing treatment in the County Education Area, either for mentally or physically defective children, though there is very urgent need for action in this respect. Numerous cases have been brought to my notice of mentally defective children who require special treatment, and who are not only a danger to themselves, but also to the community.

The conditions prevailing on account of the war have prevented any action being taken by the Education Committee to erect a building on the site purchased at Glake Hall, near Durham, for the accommodation of mentally defective children, and it has also been impossible to obtain adequate treatment of such children in outside institutions.

Less urgent perhaps, but very necessary, is the provision of means for accommodating and treating children suffering from physical defects.

XI.—SPECIAL SCHOOLS AND CLASSES.

There are none of these in the County Area at present, but as far as possible children requiring special treatment, such as those who are blind and deaf, are sent to outside institutions. During 1916 eighty children were maintained by the Education Committee at a total cost of £2,099 2s. 0d.

The provision of open-air classes or schools for children suffering from malnutrition, debility, and also what may be called pre-tuberculous children, is greatly needed.

XII.—ARRANGEMENTS FOR FEEDING OF CHILDREN.

It was not found necessary during the year to provide meals for school children in any part of the County Education Area.

XIII.—HYGIENE AND PHYSICAL TRAINING.

I have nothing to add to the remarks contained in my last annual report, but I am glad to note that this important matter is being pushed by the Board of Education, and it is to be hoped that a satisfactory scheme with which the School Medical Department is associated, as suggested in Circular 976, issued by the Board of Education in February last, will be adopted in the County Education Area at no distant date.

XIV.—SCHOOL SANITATION.

The practice of previous years, by which the assistant school medical officers when visiting a school enquired into and reported on its sanitary conditions was followed during 1916, and any defect requiring attention was brought to the notice of the Clerk to the Education Committee. I have reason to believe that as far as possible such defects received the necessary attention. One defect of some importance frequently mentioned by the assistant school medical officers in their sanitary reports is the insufficient warming of school premises during the winter months, and I am afraid there is undoubted evidence that in many schools the appliances for heating are insufficient to secure the necessary warmth in severe wintry weather.

The erection of new schools was practically at a standstill throughout the year, and no plans were submitted to me as School Medical Officer.

XV.—EXAMINATION OF PUPIL TEACHER CANDIDATES.

The school medical staff examined 72 boys and 263 girls during the year. One boy was rejected on account of otorrhœa ; 11 were provisionally accepted subject to defects other than teeth receiving attention, and the remainder were passed. Of the girl candidates, one was rejected on account of enuresis ; one owing to heart disease ; and two on account of goitre, while 43 were provisionally accepted subject to defects other than teeth receiving attention, and the remainder were passed.

There were a very large number of candidates whose teeth were unsatisfactory, and no less than 26 boys and 85 girls had four or more carious teeth, with, in not a few cases, accompanying oral sepsis.

A number of the candidates were unvaccinated, and a very large proportion had never been re-vaccinated.

I am,

Your obedient servant,

21st May, 1917.

T. EUSTACE HILL.

TABLE I.

NUMBER OF CHILDREN INSPECTED 1ST JANUARY, 1916, TO 31ST DECEMBER, 1916.

(a) "CODE" GROUPS.

| Age | Entrants. | | | | Leavers. | | | | | Grand Total. |
|--------------|-----------|-------|-------------|--------|----------|----|----|-------------|--------|--------------|
| | 5 | 6 | Other Ages. | Total. | 12 | 13 | 14 | Other Ages. | Total. | |
| Boys | 601 | 523 | 102 | 1,226 | .. | .. | .. | .. | .. | 1,226 |
| Girls..... | 646 | 560 | 97 | 1,303 | .. | .. | .. | .. | .. | 1,303 |
| Totals | 1,247 | 1,083 | 199 | 2,529 | .. | .. | .. | .. | .. | 2,529 |

(b) GROUPS OTHER THAN "CODE."

| | Intermediate Group (other than eight years). | Special Cases. | Re-examinations (i.e. Number of Children Re-examined). |
|--------------|--|----------------|---|
| Boys | | 2,383 | |
| Girls | | 3,139 | |
| Totals | | 5,522 | 11,251 |

TABLE II.

RETURN OF DEFECTS FOUND IN THE COURSE OF MEDICAL INSPECTION.

| DEFECT OR DISEASE. | CODE GROUPS. | | SPECIALS. | |
|--|--------------------------------|--|--------------------------------|--|
| | Number referred for treatment. | Number requiring to be kept under observation, but not referred for treatment. | Number referred for treatment. | Number requiring to be kept under observation, but not referred for treatment. |
| Malnutrition..... | 344 | .. | 900 | .. |
| Uncleanliness :— | | | | |
| Head | 141 | 37 | 331 | 82 |
| Body | 63 | .. | 157 | .. |
| Skin { Ringworm—Head | 29 | .. | 92 | .. |
| Body | 4 | .. | 11 | .. |
| Scabies | 13 | .. | 101 | .. |
| Impetigo | 57 | .. | 227 | .. |
| Other Disease | 24 | .. | 154 | .. |
| Eye { Defective Vision and Squint | 52 | .. | 1270 | 259 |
| External Eye Disease | 71 | 8 | 384 | 98 |
| Ear { Defective Hearing | .. | .. | 88 | 130 |
| Ear Disease | 28 | 3 | 216 | 13 |
| Nose and Throat { Enlarged Tonsils | 110 | 218 | 240 | 356 |
| Adenoids..... | 30 | 39 | 272 | 209 |
| Enlarged Tonsils and Adenoids..... | .. | .. | .. | .. |
| Defective Speech | .. | 31 | .. | 200 |
| Heart and Circulation { Heart Disease— | | | | |
| Organic | .. | 10 | .. | 59 |
| Functional | .. | 3 | .. | 34 |
| Anæmia | 16 | .. | 181 | .. |
| Lungs { Pulmonary Tuberculosis— | | | | |
| Definite | 2 | .. | 81 | .. |
| Suspected | .. | 6 | .. | 113 |
| Chronic Bronchitis | 23 | .. | 64 | .. |
| Other Disease | 65 | .. | 124 | .. |
| Nervous System { Epilepsy | .. | .. | 27 | .. |
| Chorea..... | 1 | .. | 38 | .. |
| Other Disease | 7 | .. | 83 | .. |
| Non-Pulmonary Tuberculosis— | | | | |
| Glands..... | 2 | .. | 76 | .. |
| Bones and Joints | 6 | .. | 38 | .. |
| Other Forms | 1 | .. | 15 | .. |
| Rickets | 18 | 30 | 58 | 64 |
| Deformities | 24 | 3 | 142 | 15 |
| Other Defects or Diseases.. | 37 | 81 | 387 | 612 |

TABLE III. (a).

CHILDREN TEMPORARILY EXCLUDED FROM SCHOOL BY THE SCHOOL MEDICAL OFFICER,
AND REASON FOR SUCH EXCLUSION (SEE ARTICLE 53 (b) OF SCHOOL CODE).

| Conditions. | No. of Children Excluded. |
|--|---------------------------|
| Verminous Conditions | 77 |
| Ringworm | 27 |
| Impetigo | 42 |
| Scabies | 208 |
| Eczema | 10 |
| Tuberculosis (Lungs) | 169 |
| Tuberculosis (Lungs) (Suspected) | 26 |
| Tuberculosis (Intestinal) | 15 |
| Tuberculosis (Osseous)..... | 47 |
| Tubercular Disease of Hip-joint | 28 |
| Tubercular Disease of Knee | 28 |
| Tubercular Glands | 131 |
| Attending Tuberculosis Dispensaries..... | 380 |
| Admitted into Sanatoria | 320 |
| Rickets..... | 8 |
| Acute Bronchitis | 29 |
| Anæmia | 37 |
| Heart Affections | 49 |
| Inflammation of the Eyes | 104 |
| Tonsilitis | 18 |
| Chorea | 55 |
| Epilepsy..... | 9 |
| Otorrhœa | 12 |
| Diphtheria | 124 |
| Scarlet Fever | 177 |
| Contacts with Infectious Disease..... | 291 |
| Enteric Fever | 4 |
| Whooping Cough | 11 |
| Measles..... | 5 |
| Chickenpox | 6 |
| Mumps | 6 |
| Bright's Disease | 3 |
| Other Conditions | 469 |
| TOTAL..... | 2925 |

TABLE III. (b).

CHILDREN PERMANENTLY EXCLUDED FROM SCHOOL BY THE SCHOOL MEDICAL OFFICER, AND REASON FOR SUCH EXCLUSION.

| Conditions. | Total. |
|---|--------|
| Heart Affection | 11 |
| Attending Dispensary | 3 |
| Spinal Caries | 2 |
| Empyema | 1 |
| Mentally Defective..... | 14 |
| Epilepsy..... | 6 |
| Poor State of Health | 6 |
| Tuberculous Ankle | 1 |
| Tuberculous Abscesses discharging | 2 |
| Paralysis | 4 |
| Discharging Sinus, Hip | 1 |
| Phthisis .. | 17 |
| Debility | 5 |
| Acute Rheumatism | 1 |
| Otorrhœa | 1 |
| Enuresis..... | 1 |
| Eye Affection | 3 |
| Chorea | 2 |
| Nephritis | 1 |
| Tubercular Glands | 3 |
| Bright's Disease | 1 |
| Nævus | 1 |
| Deaf Mute | 1 |
| Spinal Injury | 1 |
| TOTAL..... | 89 |

TABLE IV.

RE-INSPECTION OF CHILDREN FOUND TO BE DEFECTIVE AT THE ROUTINE MEDICAL EXAMINATION.

Number of Schools visited 385
 Number of Departments visited 577

Number of Cases Re-inspected 11,251
 Number of instances when a parent was present 411

| CONDITION. | No. of defects found for which treatment was considered necessary | | | No. of defects for which no report is available. | No. of defects treated. | Results of treatment. | | | No. of defects not treated. | Percentage of defects treated. |
|------------------------------------|---|------------|---------------|--|-------------------------|-----------------------|--------------|------------|-----------------------------|--------------------------------|
| | From previous year. | New | Total. | | | Remedied. | Improved. | Unchanged | | |
| Clothing | 396 | 8 | 404 | 100 | 176 | 58 | 115 | 3 | 128 | 43.56 |
| Footgear | 271 | 8 | 279 | 70 | 130 | 68 | 59 | 3 | 79 | 46.59 |
| Cleanliness of head* | 3264 | 46 | 3310 | 437 | 1099 | 417 | 595 | 87 | 1774 | 33.2 |
| Cleanliness of body* | 430 | 8 | 438 | 103 | 269 | 16 | 187 | 66 | 66 | 61.41 |
| Nutrition | 3632 | 27 | 3659 | 498 | 806 | 303 | 448 | 55 | 2355 | 22.03 |
| Nose and Throat | 978 | 43 | 1021 | 145 | 540 | 349 | 128 | 63 | 336 | 52.89 |
| External Eye Disease | 679 | 13 | 692 | 64 | 334 | 211 | 56 | 67 | 294 | 48.26 |
| Ear Disease | 1036 | 57 | 1093 | 191 | 210 | 22 | 147 | 41 | 692 | 19.21 |
| Teeth | 461 | 12 | 473 | 119 | 324 | 120 | 113 | 91 | 30 | 68.5 |
| Heart and Circulation | 439 | 25 | 464 | 150 | 296 | 58 | 186 | 52 | 18 | 63.8 |
| Lungs | 89 | 2 | 91 | 20 | 50 | 16 | 21 | 13 | 21 | 54.94 |
| Nervous System | 1011 | 62 | 1073 | 184 | 796 | 647 | 99 | 50 | 93 | 74.18 |
| Skin | 39 | .. | 39 | 4 | 21 | 3 | 17 | 1 | 14 | 53.85 |
| Rickets | 122 | 2 | 124 | 25 | 43 | 10 | 25 | 8 | 56 | 34.68 |
| Deformities | 209 | 5 | 214 | 46 | 148 | 40 | 79 | 29 | 20 | 69.16 |
| Tuberculosis (non-pulmonary) | 36 | 2 | 38 | 7 | 12 | 1 | 9 | 2 | 19 | 31.58 |
| Speech | 133 | 5 | 138 | 39 | 30 | 1 | 20 | 9 | 69 | 21.74 |
| Mental Condition | 2601 | 12 | 2613 | 350 | 998 | 162 | 612 | 224 | 1265 | 38.19 |
| Vision and Squint | 272 | 18 | 290 | 48 | 96 | 43 | 31 | 22 | 146 | 33.1 |
| Hearing | 769 | 37 | 806 | 57 | 262 | 144 | 76 | 42 | 487 | 32.5 |
| Total | 16,867 | 392 | 17,259 | 2,657 | 6,640 | 2,689 | 3,023 | 928 | 7,962 | 38.47 |

* It has been found necessary to bracket these conditions, as during the earlier part of the year the figures were not given separately.

TABLE V.

NOTICES SENT TO PARENTS AND HEAD TEACHERS REGARDING CHILDREN FOUND TO BE DEFECTIVE AT THE SCHOOL MEDICAL EXAMINATION DURING THE YEAR 1916:

| Nature of Notice. | No. |
|--|-------|
| Form 5 (M.I.)— (notice to parents <i>re</i> defects requiring medical advice)..... | 2439 |
| Form 6 (M.I.)— (notice to parents with directions <i>re</i> cleaning of dirty heads) | 1157 |
| Form 8 (M.I.)— (notice to parents—children excluded temporarily from school) | 2925 |
| Form 11 (M.I.)— (notice to parents <i>re</i> uncleanliness)..... | 144 |
| Form 11a (M.I.)— (notice to parents <i>re</i> verminous conditions, <i>e.g.</i> , head, body, or clothing) | 103 |
| Form 13 (M.I.)— (notice to head teachers <i>re</i> children who are suffering from heart affections and should be excused from drill) | 105 |
| Form 14 (M.I.)— (notice to head teachers <i>re</i> children suffering from defective eyesight, and the position in class of such children in order to avoid eye-strain) | 1029 |
| TOTAL..... | 7,902 |

SECONDARY NOTICES.—SENT TO PARENTS IN CASES WHERE NO MEDICAL ADVICE HAD BEEN OBTAINED IN RESPONSE TO THE NOTICES MENTIONED ABOVE.

| Nature of Notice. | No. |
|----------------------|-------|
| Form 5a (M.I.) | 2634 |
| Form 6a (M.I.) | 456 |
| TOTAL..... | 3,090 |

Total number of notices issued (First and Secondary)— 10,992

REPORT ON EYE WORK FOR THE YEAR 1916.

By LILLIE JOHNSON, M.B., B.S., B.Sc.

During the year 1916 I have examined 614 children whose eyesight was found defective at school inspections. Eighteen eye centres have been visited, and two days per week have generally been devoted to this work.

Of the cases examined 24 were found to have no refractive error. In 103 cases the defect was due to simple hypermetropia ; in 79 to myopia ; in 262 cases to hypermetropic astigmatism ; in 76 to myopic astigmatism ; and in 47 to mixed astigmatism. There were 61 cases with squint, and six cases suffered from nystagmus. Other defects of minor importance were found, but they have not been classified. Some of the myopic cases had errors of more than seven dioptres, and in one an error of 15 dioptres was found.

There were 20 cases with corneal opacities. Twelve of these had also errors of refraction. Of other defects found 10 suffered from external inflammation, one from cataract, one from congenital absence of iris, one from iritis, and one from choroiditis.

L. JOHNSON.

7th April, 1917.

TABLE VI.
STATEMENT SHEWING NUMBER OF CHILDREN EXAMINED BY SCHOOL OPHTHALMIC SURGEON, NUMBER OF PRESCRIPTIONS ISSUED AND NUMBER OF SPECTACLES SUPPLIED, ETC., DURING 1916.

REPORT OF HEALTH VISITORS' WORK FOR THE YEAR 1916.

Dirty and Verminous Conditions. Defective Clothing.—Many of these cases are frequently visited after they are reported to be satisfactory to see if the improvement is maintained. This is how the number reported "satisfactory" is sometimes as great, or greater, than the total number of cases under supervision.

Complete or partial head inspections took place in a few schools during the year, lack of time preventing our paying more attention to this important branch of work.

Scabies.—The home supervision of this disease took up a great deal of time, and many special visits were paid to schools to ascertain if any undetected cases were in attendance.

Number of Visits.—There was a large increase in the number of home visits : 21,432, as compared with 13,569 in 1915 ; and 2,770 visits were paid to schools ; the number in 1915 being 1,932.

War Conditions.—The Health Visitors report the children's footwear as very bad in many cases ; it seems very desirable to encourage the wearing of clogs. In some cases the children are underfed, partly as a result of lack of knowledge on the mothers' part as to how to make the best of the cheaper foods available. Special lectures to mothers by the Cookery and Housewifery teachers already working in the county, would, I think, do much good.

Prosecutions under Section 12 of the Children Act.—During 1916, acting under the direction of the School Medical Officer, I instituted proceedings in 36 cases against parents who neglected to keep their children in a cleanly condition. Evidence was given by the Health Visitors, and in every case a conviction was obtained.

H. S. COOPER HODGSON,

Superintendent of Health Visitors.

TABLE VII.

ANALYSIS OF CASES UNDER THE HOME SUPERVISION OF THE HEALTH VISITORS DURING THE YEAR 1916.

| CONDITIONS. | Total Conditions under Supervision. | Total No. of Visits <i>re</i> Conditions. | Total satisfactorily improved |
|-----------------------------------|--|--|-------------------------------------|
| Verminous Head and Body | 2,296 | 5,341 | 1,929 |
| Dirt | 775 | 1,917 | 967 |
| Clothing and Boots | 772 | 1,828 | 853 |
| Teeth | 104 | 146 | 17 |
| External Eye Disease | 1,145 | 1,856 | 776 |
| Otorrhœa | 401 | 605 | 129 |
| Nose and Throat | 666 | 980 | 94 |
| Impetigo | 2,340 | 3,421 | 1,799 |
| Scabies | 1,901 | 3,544 | 1,394 |
| Ringworm | 753 | 1,152 | 471 |
| Tuberculosis (Lungs) | 746 | 1,932 | * |
| Tuberculosis (other forms)..... | 342 | 947 | * |
| Visits <i>re</i> Spectacles | 850 | 1,066 | ** |
| Other Conditions | 1,517 | 2,798 | 779 |
| TOTALS | 14,608 | 27,533 | 9,208 |

* Conditions *re* which it seemed undesirable for health visitors to express opinion as to whether satisfactorily improved.

** A large proportion of these visits paid to ascertain if parents were willing to have children examined by the School Ophthalmic Surgeon. Others paid to ascertain why spectacles were not purchased.